## Pomentare

## STATE OF NEVADA BALLOT ADVOCACY GROUP (BAG) Statement of Organization

FAXED | FILL.

WAY 2.9 2008

SECRETIONS DIVISION

SECRETARY OF STATE

Secretary of State Ross Miller



## BALLOT ADVOCACY GROUP: (check one)

| New Registration  |                                  |                   | _            |                        |                |
|---|----------------------------------|-------------------|--------------|------------------------|----------------|
| Amended Registration (  | if amended, list reason)         |                   |              |                        | . (            |
| Change Resi   | dent Agent                       | Chang             | e of Address | S                      |                |
| ☐ Change in O   | fficers                          | Other             |              |                        |                |
| NAME OF COMMITTEE:  | Incorporate Pahrump Con          | nmittee           |              |                        |                |
| Mailing Address:  | 4770 South Arezzo Aven           | ne                |              |                        |                |
|   | Pahrump                          | NV                | 89061        | 775-75                 | 1-9759         |
|   | City                             | State             | Zip          | Tele                   | phone          |
| To promote the incorporation  RESIDENT AGENT: (Pursuithis state a resident agent who must  Name of Resident | ant to AB 604 of the 74th Legisl | s in the State of |              | cacy Group must appoir | ni and keep in |
| Mailing A   | ddress: 4770 South Arezz         | o Avenue          |              |                        | _              |
|   | Pahrump                          | NV                | 89061        | 775-751-9759           |                |
|   | City                             | Ştatc             | Zip          | Telephone              | _              |
| ACC   | EPTANCE OF APPOIN                | MENT BY           | RESIDENT     | AGENT                  |                |
| I, Timothy F. Locki   | inger , hereby ac                | cept appointm     | ent as Resid | ent Agent for the a    | bove named     |
| Ballot Advocacy Group.  |                                  |                   |              |                        |                |
| x Amothy 7. a   | John J                           |                   |              | 5-29-08                |                |
| Signature of Residen  | nt Agent //                      |                   |              | Date                   |                |

| NAME: Timothy F. Lockinger  | ADDRESS: 681 Sc  | outh Highw   | ay 160                              | _                   |
|---|--|--------------|-------------------------------------|---------------------|
| TITLE: Treasurer/Director   | Pahrump  | NV           | 89048                               | 775-751-650         |
|   | City   | State        | Zip                                 | Telephone           |
| NAMOE: Lori Doller  | ADDRESS: 681 Sc  | outh Highw   | ay 160                              |                     |
| TITLE: Secretary/Director   | Pahrump  | NV           | 89048                               | 775-751-650         |
|   | City   | State        | Zıp                                 | Telephone           |
| NAME: Jeremy Jenson   | ADDRESS: 681 Se  | outh Highw   | vay 160                             | ····                |
| TITUE: President/Director   | Pahrump  | NV           | 89048                               | 775-751-650         |
|   | City   | State        | Zip                                 | Telephone           |
| NAME:   | ADDRESS:   |              |                                     |                     |
| TITLE:  |  |              |                                     | -                   |
|   |  | _            |                                     |                     |
| If the Ballot Advocacy Group is affiliated a<br>number of each organization. (Please attach a<br>Name of Organization | additional pages if necessary)   |              | Zip<br>ne, address s<br>Felephone I |                     |
| number of each organization. (Please attach a   | AFFILIATIONS with any other organizations. additional pages if necessary)            | list the nan | ne, address a                       | and telephone       |
| number of each organization. (Please attach a   | AFFILIATIONS with any other organizations. additional pages if necessary)            | list the nan | ne, address a                       | and telephone       |
| number of each organization. (Please attach e   | AFFILIATIONS with any other organizations. additional pages if necessary)            | list the nan | ne, address a                       | and telephone       |
| number of each organization. (Please attach e   | AFFILIATIONS  with any other organizations.  additional pages if necessary)  A       | list the nan | ne, address a                       | and telephone       |
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| Name of Organization. (Please attach a  | AFFILIATIONS  with any other organizations.  additional pages if necessary)  A       | list the nan | re, address a                       | Telephone           |
| Name of Organization  Organization  Organization  | AFFILIATIONS  with any other organizations.  additional pages if necessary)  A       | list the nan | re, address a Felephone I  c Zip    | Telephone           |
| Name of Organization  Organization  Organization  Organization  Organization  | AFFILIATIONS  with any other organizations.  additional pages if necessary)  A  City | list the nam | re, address a Felephone I  c Zip    | Telephone Telephone |
| Organization  | AFFILIATIONS  with any other organizations.  additional pages if necessary)  A  City | list the nam | c Zip                               | Telephone Telephone |

Prescribed to Secretary of Man-E1402 (Rev. 10:07) 4B Off of the "July Legislative Session.



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